



APPLICATION



Please complete all of the sections of this form and sign in the space provided on the reverse.

PERSONAL DETAILS

Surname:		Forename(s):	
Date of Birth:	Gender:	Age on 31st August 2015:	
Address:			
			Postcode:
Email address:	Home Tel:	Mobile:	
Present School or College:			
If you are not in education please state:			
Previous School or College:			Date of leaving:
Have you been resident in the UK or EU for the last three years?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
When did you become an EU/UK resident?		What was your previous country of residence?	

EMERGENCY CONTACT DETAILS Please give us the name of the main person to contact in an emergency:

Title:		Surname:		Forename:	
Relationship to you:					
Address:					
					Postcode:
Email address:			Home Tel:		Mobile:

EXAMINATION DETAILS

[illegible]

CAREER INTENTIONS What course and/or career do you intend to follow after leaving College?

COURSE CHOICE List in order of preference the subject(s) that you would like to study at College:

ETHNIC ORIGIN

Please tick the box which best describes your ethnic background:

31: English / Welsh Scottish / Northern Irish / British	<input type="checkbox"/>	38: Mixed / Multiple Ethnic background	<input type="checkbox"/>	45: Caribbean	<input type="checkbox"/>
32: Irish	<input type="checkbox"/>	39: Indian	<input type="checkbox"/>	46: Other Black / African / Caribbean	<input type="checkbox"/>
33: Gypsy or Irish Traveller	<input type="checkbox"/>	40: Pakistani	<input type="checkbox"/>	47: Arab	<input type="checkbox"/>
34: Any other White background	<input type="checkbox"/>	41: Bangladeshi	<input type="checkbox"/>	98: Any other ethnic group	<input type="checkbox"/>
35: White and Black Caribbean	<input type="checkbox"/>	42: Chinese	<input type="checkbox"/>		
36: White and Black African	<input type="checkbox"/>	43: Other Asian background	<input type="checkbox"/>		
37: White and Asian	<input type="checkbox"/>	44: African	<input type="checkbox"/>		

SUPPORTING YOUR STUDIES

We welcome applications from students with learning difficulties and/or disabilities. To help us support you, please complete the following.

Do you have a:

Disability:	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>
Learning Difficulty:	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>
Health problem:	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>

Please outline below any relevant information you feel important

MARKET RESEARCH

What was your main reason for choosing St John Rigby College?

How were you made aware of the College? Please tick as many boxes as you feel relevant:

Connexions/careers service	<input type="checkbox"/>	WISH FM	<input type="checkbox"/>	Lancashire Advertiser	<input type="checkbox"/>
Wigan Observer	<input type="checkbox"/>	Wigan Evening Post	<input type="checkbox"/>	Recommendation from current/former student	<input type="checkbox"/>
Wigan Reporter	<input type="checkbox"/>	School	<input type="checkbox"/>	SJR representative in school	<input type="checkbox"/>

RELIGION

Please state your religion (tick)

Catholic	<input type="checkbox"/>	Other Christian	<input type="checkbox"/>	Other religion	<input type="checkbox"/>	None	<input type="checkbox"/>
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YOUR INTERESTS

Please use this section to tell us a little about yourself and the interests and activities you enjoy. E.g. Sport, team sport, music, dance, drama, Duke of Edinburgh etc.

NEED MORE INFORMATION?

For more information please email: admissions@sjr.ac.uk or call: **01942 214797**

WHAT NOW?

Please send this form to the St John Rigby College Admissions Department

Admissions
St John Rigby College
Gathurst Road
Orrell
Wigan
WN5 0LJ

You will receive an acknowledgement of the receipt to your application within 5 working days. We will then contact you to arrange an interview.

To be considered for a place it is essential that completed application forms are returned before the College closing date. You must return this form directly to St John Rigby College by Friday 30th January 2015. Applications received after this date will be placed on a waiting list.

DATA PROTECTION STATEMENT

The information on this form may be used by the College for the purpose of administration, careers and other guidance, statistical and research purposes. It may also be shared with external organisations for these purposes.

Signature:	<input type="text"/>	Date:	<input type="text"/>
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CLOSING DATE FOR APPLICATIONS FRIDAY 30th JANUARY 2015